5

09/806091

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE 2 6 MAR 2001

In re Application of

Atty. Docket

PIERRE GAUTIER ET AL

PHF 99,621

Serial No.:

Filed: CONCURRENTLY

Title: METHOD AND DEVICE FOR ENCODING VIDEO SIGNALS

Commissioner for Patents Washington, D.C. 20231

## APPOINTMENT OF ASSOCIATES

Sir:

The undersigned Attorney of Record hereby revokes all prior appointments (if any) of Associate Attorney(s) or Agent(s) in the above-captioned case and appoints:

RUSSELL GROSS

(Registration No. 40,007)

MICHAEL E. MARION

(Registration No. 32,266)

c/o PHILIPS ELECTRONICS NORTH AMERICA CORPORATION, Corporate Intellectual Property, 580 White Plains Road, Tarrytown, New York 10591, his Associate Attorney(s)/Agent(s) with all the usual powers to prosecute the above-identified application and any division or continuation thereof, to make alterations and amendments therein, and to transact all business in the Patent and Trademark Office connected therewith.

ALL CORRESPONDENCE CONCERNING THIS APPLICATION AND THE LETTERS PATENT WHEN GRANTED SHOULD BE ADDRESSED TO THE UNDERSIGNED ATTORNEY OF RECORD.

Respectfully,

ck E. Haken, Reg. 26,902

 $m{t}$ torney of Record

Dated at Tarrytown, New York on March 22, 2001.



ATTORNEY'S DOCKET NO .: PHF 99.621 US

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled							
"Méthod and device for encoding video signals"							
the specification of wh							
is attached hereto. was filed on as Appl				rial No.	ar	nd was amended	on applicable).
I hereby state	that I have reviewed ar	nd understand	the conter	nts of the above-identifie	d specification	, including the cla	ms, as
amended by the amer	ndment(s) referred to about the duty to disclose in	ove.					
of Federal Regulations	s, §1.56(a).						
I hereby clair	n foreign priority benefits	under Title 35	5, United S	States Code, § 119 of an	y foreign appli	cation(s) for pater	t or inventor's
	and have also identified thich priority is claimed:	i below any for	eign applic	cation for paterit or inver	nor's cermican	e naving a ming de	ale belore trial
or the approximent of	, , , , , , , , , , , , , , , , , , ,	PRIOR FO	REIGN A	PPLICATION(S)			
COUNTRY	APP. NUMBER	DA	ATE OF FI	LING		PRIORITY CLAI	
				NTH, YEAR)		UNDER 35 U.S.	C. 119
Europe	99401969.3		August 19			YES YES	
Europe	99403228.2		Decembe	er 1999		152	
the subject matter of e	n the benefit under Title each of the claims of this 35 United States Code, §1,56(a) which occurred	application is §112, I acknown between the fi	not disclos wledge the ling date o	sed in the prior United S e duty to disclose materi	tates application at information a	on in the manner p as defined in Title	rovided by the 37, Code of
of or de					CTATUS (DA	TENTED, PENDI	NC
APPLICATION SERIA	IL NUMBER	FILING DATI	E		ABANDONE		NG,
Ţ.							
jai		ļ <u></u>					
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.  POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (list name and registration number)							
Algy Tamoshunas, Re Jack E. Haken, Reg. N	•						
SEND CORRESPONDENCE TO: Corporate Patent Counsel; D				DIRECT TELEPHONE	CALLS TO:		
U.S. Philips Corporation	on; 580 white Plains Roa	ad;		(name and telephone	No.)		
Tarrytown, NY 10591				(914) 332-0222			
Dated: Inventor's Signature:							
00	T 1 = -4 N2		Cinck NI		Middle Name	0-	
Full Name of in Inventor	Last Name GAUTIER		First Nar Pierre	ne	Middle Name	•	ŀ
Residence &	City			State of Foreign Country		Country of Citizenship	
Citizenship	Nogent-Sur-Marne			rance JRX France			
Post Office Address	Street	eet City		City Si 94130 Nogent-Sur-Marne Fi		ntry	Zip Code
Dated: Inventor's Signature:							
Full Name of in	Last Name		First Nar	ne	Middle Name	<del></del>	
Inventor	_DEL_CORSO		Sandra			<del> </del>	
Residence &	City Clamart		State of	Foreign Country	Country of C France	ıtizenship	
Citizenship Post Office Address	Street c/o Melle Vig		City		State of Cou	ntry	Zip Code
1 000 011100 / 1001000	124, Avenue Jean-J		92140 C	lamart	France	- /	•

Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications)

Attorneys Docket Number PHF 99.621 US

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) abnd/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Algy	Ta	moshun	as Re	eg. N	No.	27,677
Jack	E.	Haken,	Reg.	No.	26	,902

Direct Telephone Calls to: (name and telephone number) (914)332-0222

FULL NAME OF FAMILY NAME GAUTIER  RESIDENCE & CITY POST OFFICE ADDRESS  202  202  RESIDENCE & CITY NOgent-Sur-Marne POST OFFICE ADDRESS  7 rue Théodore Honoré POST OFFICE ADDRESS  CITY STATE OR FOREIGN COUNTRY France POST OFFICE ADDRESS C/O Melle Vigier, 124, Avenue Jean-Jaurès  FULL NAME OF INVENTOR  RESIDENCE & CITY POST OFFICE ADDRESS C/O Melle Vigier, 124, Avenue Jean-Jaurès  FIRST GIVEN NAME FIRST GIVEN NAME SECOND GIVEN NAME SECOND GIVEN NAME SECOND GIVEN NAME CUNTRY OF CITIZENSHIP France France POST OFFICE ADDRESS C/O Melle Vigier, 124, Avenue Jean-Jaurès  FIRST GIVEN NAME ISABELLE  FULL NAME OF INVENTOR  RESIDENCE & CITY POST OFFICE ADDRESS ADDRES					
201 RESIDENCE & CITY ADDRESS A	$\sim$				SECOND GIVEN NAME
CITIZENSHIP POST OFFICE ADDRESS ADDRESS 7 rue Théodore Honoré 94130 Nogent-Sur-Marne Full Name OF FAMILY NAME DEL CORSO CITY STATE OR FOREIGN COUNTRY France  FULL NAME OF INVENTOR RESIDENCE & CITY ADDRESS ADRESS C/O Melle Vigier, 124, Avenue Jean-Jaurès  FULL NAME OF INVENTOR RESIDENCE & CITY France FOST OFFICE ADDRESS C/O Melle Vigier, 124, Avenue Jean-Jaurès  FULL NAME OF INVENTOR RESIDENCE & CITY Paris FOST OFFICE ADDRESS CITY Paris FULL NAME OF INVENTOR RESIDENCE & CITY Paris FULL NAME OF INVENTOR RESIDENCE & CITY POST OFFICE ADDRESS ADDRESS APP. B471 - 36, rue de Picpus  FULL NAME OF INVENTOR RESIDENCE & CITY POST OFFICE ADDRESS APP. B471 - 36, rue de Picpus  FULL NAME OF INVENTOR RESIDENCE & CITY POST OFFICE ADDRESS APP. B471 - 36, rue de Picpus  FULL NAME OF INVENTOR RESIDENCE & CITY POST OFFICE ADDRESS APP. B471 - 36, rue de Picpus  FULL NAME OF INVENTOR RESIDENCE & CITY STATE OR FOREIGN COUNTRY France  FIRST GIVEN NAME SECOND GIVEN NAME SECOND GIVEN NAME  FIRST GIVEN NAME SECOND GIVEN NAME  SECOND GIVEN NAME  FIRST GIVEN NAME SECOND GIVEN NAME  FIRST GIVEN NAME SECOND GIVEN NAME  FIRST GIVEN NAME SECOND GIVEN NAME  FIRST GIVEN NAME  FIRST GIVEN NAME  FIRST GIVEN NAME SECOND GIVEN NAME  FIRST GIVEN NAME  FIRS		INVENTOR	GAUTIER		
POST OFFICE ADDRESS 7 rue Théodore Honoré 94130 Nogent-Sur-Marne FULL NAME OF FAMILY NAME DEL CORSO 1 CITY 1 STATE & ZIP CODE/COUNTRY France  FULL NAME OF INVENTOR  RESIDENCE & CITY POST OFFICE ADDRESS C/O Melle Vigier, 124, Avenue Jean-Jaurès  FULL NAME OF INVENTOR  FAMILY NAME FIRST GIVEN NAME CITY POST OFFICE ADDRESS C/O Melle Vigier, 124, Avenue Jean-Jaurès  FULL NAME OF INVENTOR  RESIDENCE & CITY POST OFFICE ADDRESS C/O Melle Vigier, 124, Avenue Jean-Jaurès  FIRST GIVEN NAME Isabelle  RESIDENCE & CITY POST OFFICE ADDRESS ADDRESS ADDRESS APP. B471 - 36, rue de Picpus  FULL NAME OF INVENTOR  RESIDENCE & CITY POST OFFICE ADDRESS APP. B471 - 36, rue de Picpus  RESIDENCE & CITY France FIRST GIVEN NAME FIRST GIVEN NAME FIRST GIVEN NAME SECOND GIVEN NAME France  France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France France F	201		CITY		
FULL NAME OF INVENTOR Paris  FULL NAME OF INVENTOR Paris  FULL NAME OF INVENTOR  FOST OFFICE ADDRESS  ADDRESS  ADDRESS  FOST OFFICE ADDRESS  C/O Melle Vigier, 124,  Avenue Jean-Jaurès  FULL NAME OF INVENTOR  FOST OFFICE ADDRESS  C/O Melle Vigier, 124,  Avenue Jean-Jaurès  FULL NAME OF INVENTOR  FAMILY NAME  FIRST GIVEN NAME  FIRST OFFICE ADDRESS  APD. B471 - 36, rue de  POST OFFICE ADDRESS  APD. B471 - 36, rue de  PIUL NAME OF INVENTOR  FAMILY NAME  FIRST GIVEN NAME  F		CITIZENSHIP	Nogent-Sur-Marne	France JRX	France
FULL NAME OF INVENTOR  POST OFFICE ADDRESS C/O Melle Vigier, 124, Avenue Jean-Jaurès  FULL NAME OF INVENTOR  FOST OFFICE ADDRESS C/O Melle Vigier, 124, Avenue Jean-Jaurès  FULL NAME OF INVENTOR  FOST OFFICE ADDRESS CITY STATE OR FOREIGN COUNTRY France  FOST OFFICE ADDRESS ADRESS ADDRESS ADDR			POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
INVENTOR   DEL CORSO   Sandra		ADDRESS	7 rue Théodore Honoré	94130 Nogent-Sur-Marı	ne France
RESIDENCE & CITY Clamart France France STATE & ZIP CODE/COUNTRY France France STATE & ZIP CODE/COUNTRY STATE & ZIP CODE/COUNTRY ADDRESS POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY STATE			FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
CITIZENSHIP POST OFFICE ADDRESS C/O Melle Vigier, 124, Avenue Jean-Jaurès  FULL NAME OF INVENTOR POST OFFICE ADDRESS CITY POST OFFICE ADDRESS CITY POST OFFICE ADDRESS CITY POST OFFICE ADDRESS CITY PARIS POST OFFICE ADDRESS ADDRESS ADDRESS FULL NAME OF INVENTOR POST OFFICE ADDRESS CITY STATE OR FOREIGN COUNTRY France FIRST GIVEN NAME FIRST GIVEN NAME SECOND GIVEN NAME FIRST GIVEN NAME SECOND GIVEN NAME FIRST GIVEN NAME FIRST GIVEN NAME FIRST GIVEN NAME SECOND GIVEN NAME FIRST GIVEN NAME SECOND GIVEN NAME FIRST GIVEN NAME SECOND GIVEN NAME FIRST GIVEN NAME FIRST GIVEN NAME SECOND GIVEN NAME FIRST GIVEN NAME FIRST GIVEN NAME SECOND GIVEN NAME FIRST GIVEN NAME FIRST GIVEN NAME FIRST GIVEN NAME SECOND GIVEN NAME FIRST GIVEN NAME FIRST GIVEN NAME FIRST GIVEN NAME SECOND GIVEN NAME FIRST GIVEN NAME SECOND GIVEN NAME FIRST	<del>-KX</del>	INVENTOR	DEL CORSO		
POST OFFICE ADDRESS ADDRESS FULL NAME OF INVENTOR POST OFFICE ADDRESS CITY Avenue Jean-Jaurès  FULL NAME OF INVENTOR RESIDENCE & CITY POST OFFICE ADDRESS ADDRESS ADDRESS FIRST GIVEN NAME ISABEILE FULL NAME OF INVENTOR FOST OFFICE ADDRESS	202		CITY		· · · · · · · · · · · · · · · · ·
ADDRESS  C/o Melle Vigier, 124, Avenue Jean-Jaurès  FULL NAME OF INVENTOR  RESIDENCE & CITY  POST OFFICE ADDRESS  APP. B471 - 36, rue de Picpus  FULL NAME OF INVENTOR  RESIDENCE & CITY  POST OFFICE ADDRESS  APP. B471 - 36, rue de Picpus  FULL NAME OF INVENTOR  RESIDENCE & CITY  POST OFFICE ADDRESS  APP. B471 - 36, rue de Picpus  FULL NAME OF INVENTOR  RESIDENCE & CITY  POST OFFICE ADDRESS  APP. B471 - 36, rue de Picpus  FULL NAME OF INVENTOR  RESIDENCE & CITY  STATE OFFICE ADDRESS  APP. B471 - 36, rue de Picpus  FIRST GIVEN NAME  FIRST GIVEN NAME  SECOND GIVEN NAME  COUNTRY OF CITIZENSHIP  COUNTRY OF CITIZENSHIP  FULL NAME OF INVENTOR  FUL NAME OF INVENTOR  FULL NAME OF INVENTOR  FULL NAME OF INVENTOR		CITIZENSHIP		France FRK	
Avenue Jean-Jaurès    FULL NAME OF   FAMILY NAME   Isabelle	}		POST OFFICE ADDRESS	=::::	STATE & ZIP CODE/COUNTRY
FULL NAME OF INVENTOR  FAMILY NAME  LEMAGUET  RESIDENCE & CITY  Paris  POST OFFICE ADDRESS  App. B471 - 36, rue de Picpus  FULL NAME OF INVENTOR  FULL NAME OF INVENTOR  RESIDENCE & CITY  POST OFFICE ADDRESS  App. B471 - 36, rue de Picpus  FULL NAME OF INVENTOR  RESIDENCE & CITY  POST OFFICE ADDRESS  App. B471 - 36, rue de Picpus  FAMILY NAME  FIRST GIVEN NAME  SECOND GIVEN NAME  FIRST GIVEN NAME  SECOND GIVEN NAME  SECOND GIVEN NAME  FIRST GIVEN NAME  SECOND GIVEN NAME  FIRST GIVEN NAME  FIRST GIVEN NAME  SECOND GIVEN NAME  SECOND GIVEN NAME  FIRST GIVEN NAME  SECOND GIVEN NAME  SECOND GIVEN NAME  FIRST GIVEN NAME  SECOND GIVEN NAME  SECOND GIVEN NAME  FIRST GIVEN NAME  SECOND GIVEN NAME	-	ADDRESS	c/o Melle Vigier, 124,	92140 Clamart	France
INVENTOR  LEMAGUET  RESIDENCE & CITY Paris  POST OFFICE ADDRESS App. B471 - 36, rue de Picpus  Full Name of Inventor  RESIDENCE & CITY Post Office Address App. B471 - 36, rue de Picpus  Full Name of Inventor  RESIDENCE & CITY Post Office Address App. B471 - 36, rue de Picpus  Full Name of Inventor  RESIDENCE & CITY Post Office Address Address  Full Name of Inventor  Full Name of Inventor  RESIDENCE & CITY Full Name of Inventor  Full Name of Inventor  Full Name of Inventor  Full Name of Inventor  RESIDENCE & CITY  Full Name of Inventor  For inventor  For inventor  For inventor  Full Name of Inventor  For inventor  For inventor  For inventor  Full Name of Inventor  For inventor  For inventor  For inventor  For inventor  Country of Citizenship  Country of Citizenship  For inventor  Full Name of Inventor  For inventor  For inventor  For inventor  For inventor  For inventor  Country of Citizenship  Country of Citizenship  For inventor  Country of Citizenship  Country of Citizenship  For inventor  Fo	İ		Avenue Jean-Jaurès		
RESIDENCE & CITY POST OFFICE ADDRESS App. B471 - 36, rue de Picpus  FULL NAME OF INVENTOR  POST OFFICE ADDRESS App. B471 - 36, rue de Picpus  FULL NAME OF INVENTOR  POST OFFICE ADDRESS App. B471 - 36, rue de Picpus  FULL NAME OF INVENTOR  FOR TOP INVENTOR  FULL NAME OF INVENTOR  FOR TOP INVENTOR  FULL NAME OF INVENTOR  FOR TOP INVENTOR  FULL NAME OF INVENTOR  FOR TOP INVENTOR  FOR TOP INVENTOR  FULL NAME OF INVENTOR  FOR TOP INVENTOR  FOR TOP INVENTOR  FULL NAME OF INVENTOR  FOR TOP INVENTOR  FOR TOP INVENTOR  FOR TOP INVENTOR  FULL NAME OF INVENTOR  FULL NAME OF INVENTOR  FOR TOP INVENTO			FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
CITIZENSHIP Paris France FOST OFFICE ADDRESS App. B471 - 36, rue de Picpus  FULL NAME OF INVENTOR  POST OFFICE ADDRESS  App. B471 - 36, rue de Picpus  FULL NAME OF INVENTOR  RESIDENCE & CITY  POST OFFICE ADDRESS  CITY  STATE OR FOREIGN COUNTRY  STATE & ZIP CODE/COUNTRY  COUNTRY OF CITIZENSHIP  POST OFFICE ADDRESS  CITY  FULL NAME OF INVENTOR  FULL NAME OF INVENTOR  FULL NAME OF INVENTOR  FOST OFFICE ADDRESS  CITY  STATE & ZIP CODE/COUNTRY  STATE & ZIP CODE/COUNTRY  COUNTRY OF CITIZENSHIP  CITIZENSHIP  FOST OFFICE POST OFFICE ADDRESS  CITY  STATE & ZIP COUNTRY OF CITIZENSHIP	(8)	INVENTOR	LEMAGUET		
POST OFFICE ADDRESS App. B471 - 36, rue de Picpus  FULL NAME OF INVENTOR  POST OFFICE ADDRESS App. B471 - 36, rue de Picpus  FULL NAME OF INVENTOR  RESIDENCE & CITY  POST OFFICE ADDRESS  App. B471 - 36, rue de Picpus  FIRST GIVEN NAME  FIRST GIVEN NAME  SECOND GIVEN NAME  COUNTRY OF CITIZENSHIP  CITIZENSHIP  FOST OFFICE ADDRESS  ADDRESS  FIRST GIVEN NAME  FIRST GIVEN NAME  SECOND GIVEN NAME  STATE & ZIP CODE/COUNTRY  FIRST GIVEN NAME  SECOND GIVEN NAME  FIRST GIVEN NAME  SECOND GIVEN NAME  FIRST GIVEN NAME  SECOND GIVEN NAME  FOST OFFICE & CITY  STATE OR FOREIGN COUNTRY  COUNTRY OF CITIZENSHIP  POST OFFICE POST OFFICE ADDRESS  CITY  STATE & ZIP CODE/COUNTRY  STATE & ZIP CODE/COUNTRY	203		CITY		
App. 6471 - 36, rue de Picpus    Full name of Inventor   Family name   First given name   Second given name   Second given name   First given name   Second given name	ī	CITIZENSHIP		France ALL	
App. 6471 - 36, rue de Picpus    Full name of Inventor   Family name   First given name   Second given name   Second given name   First given name   Second given name	77		POST OFFICE ADDRESS		STATE & ZIP CODE/COUNTRY
FULL NAME OF INVENTOR  FAMILY NAME  FIRST GIVEN NAME  SECOND GIVEN NAME  SECOND GIVEN NAME  SECOND GIVEN NAME  FIRST GIVEN NAME  SECOND GIVEN NAME  SECOND GIVEN NAME  SECOND GIVEN NAME  COUNTRY OF CITIZENSHIP  FOST OFFICE ADDRESS  CITY  STATE & ZIP CODE/COUNTRY  FIRST GIVEN NAME  FIRST GIVEN NAME  SECOND GIVEN NAME  STATE & ZIP CODE/COUNTRY  STATE & ZIP CODE/COUNTRY  STATE OR FOREIGN COUNTRY  COUNTRY OF CITIZENSHIP  POST OFFICE POST OFFICE ADDRESS  CITY  STATE & ZIP CODE/COUNTRY	274	ADDRESS	App. B471 - 36, rue de	75012 Paris	France
FULL NAME OF INVENTOR  FAMILY NAME  FIRST GIVEN NAME  SECOND GIVEN NAME  SECOND GIVEN NAME  SECOND GIVEN NAME  FIRST GIVEN NAME  SECOND GIVEN NAME  SECOND GIVEN NAME  SECOND GIVEN NAME  COUNTRY OF CITIZENSHIP  FOST OFFICE ADDRESS  CITY  STATE & ZIP CODE/COUNTRY  FIRST GIVEN NAME  FIRST GIVEN NAME  SECOND GIVEN NAME  STATE & ZIP CODE/COUNTRY  STATE & ZIP CODE/COUNTRY  STATE OR FOREIGN COUNTRY  COUNTRY OF CITIZENSHIP  POST OFFICE POST OFFICE ADDRESS  CITY  STATE & ZIP CODE/COUNTRY	2E3		Picpus		
POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY  FULL NAME OF INVENTOR INVENTOR CITIZENSHIP  POST OFFICE POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY  STATE & ZIP CODE/COUNTRY  STATE & ZIP CODE/COUNTRY  CITIZENSHIP  POST OFFICE POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY				FIRST GIVEN NAME	SECOND GIVEN NAME
POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY  FULL NAME OF INVENTOR INVENTOR CITIZENSHIP  POST OFFICE POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY  STATE & ZIP CODE/COUNTRY  STATE & ZIP CODE/COUNTRY  CITIZENSHIP  POST OFFICE POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY	100 mg	INVENTOR		·	
POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY  FULL NAME OF INVENTOR INVENTOR CITIZENSHIP  POST OFFICE POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY  STATE & ZIP CODE/COUNTRY  STATE & ZIP CODE/COUNTRY  CITIZENSHIP  POST OFFICE POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY	204		CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
ADDRESS  FULL NAME OF INVENTOR  FIRST GIVEN NAME  FIRST GIVEN NAME  SECOND GIVEN NAME  SECOND GIVEN NAME  FIRST GIVEN NAME  SECOND GIVEN NAME  FOUNTRY OF CITIZENSHIP  POST OFFICE POST OFFICE ADDRESS  CITY  STATE & ZIP CODE/COUNTRY	===	CITIZENSHIP			
FULL NAME OF INVENTOR  FIRST GIVEN NAME  FIRST GIVEN NAME  SECOND GIVEN NAME  SECOND GIVEN NAME  FIRST GIVEN NAME  SECOND GIVEN NAME  FOUNTRY OF CITIZENSHIP  POST OFFICE POST OFFICE ADDRESS  CITY  STATE & ZIP CODE/COUNTRY	### <u>#</u>		POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
FULL NAME OF INVENTOR FAMILY NAME FIRST GIVEN NAME SECOND GIVEN NAME  1205 RESIDENCE & CITY STATE OR FOREIGN COUNTRY  POST OFFICE POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY	le a	ADDRESS			
RESIDENCE & CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP CITIZENSHIP POST OFFICE POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY			FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
CITIZENSHIP POST OFFICE POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY	Ľ	INVENTOR			
POST OFFICE POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY	205		CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
1.001.011.02	1 '	CITIZENSHIP			
ADDRESS	ļ.		POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
		ADDRESS			

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201 CITY	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE 22 February 2001	DATE 22 February 2001	DATE 22 February 2001
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	
DATE	DATE	

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

(July 1994)

## COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF A TORNEY (includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER PHF 99.621 US

As a below named invento	r, i nereby deciare that:					
My residence, post office a	My residence, post office address and citizenship are as stated next to my name.					
plural names are listed bellentitled: "Method and o	first and sole inventor (if only one row) of the subject matter which is device for encoding video sucheck only one item below):	name is listed below) or an original claimed and for which a patent is s signals"	, first and joint inventor (if ought on the invention			
is attached hereto.						
was filed as United Sta	tes application					
Serial No						
on						
and was amended		·				
on						
☑ was filed as PCT intern	• •					
Number PCT/EP00/07	425					
on31 July 200	00					
:						
and was amended under F	PCT Article 19					
on (if applicable).						
	eviewed and understand the conte y amendment referred to above.	ents of the above-identified specific	ation, including the			
I acknowledge the duty to Title 37, Code of Federal F		rial to the examination of this appli	cation in accordance with			
or inventor's certificate or or States of America listed be any PCT international app on the same subject matter	of any PCT international application blow and have identified below any lication(s) designating at least one r having a filing date before that of	States Code, § 119 of any foreign (n(s) designating at least one count foreign application(s) for patent or country other than the United States the application(s) of which priority	ry other than the United inventor's certificate or es of America filed by me is claimed:			
PRIOR FOREIGN/PCT AF	PPLICATION(S) AND ANY PRIOR	ITY CLAIMS UNDER 35 U.S.C. 11	9:			
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119			
Europe	99401969.3	3 August 1999	YES			
Europe	99403228.2	21 December 1999	YES			
	IIS	DEPARTMENT OF COMMERCE -Pa	tent and Trademarks Office			

Dated:		Inventor's Signature:	_	
2-00		_		
Full Name of in	Last Name	First Name	/ Middle Name	
Inventor	LEMAGUET	<u>Isabelle</u>	/	
Residence &	City	State of Foreign Country /	Country of Citizenship	
Citizenship	Paris	France	France	
Post Office Address	Street	City	State of Country	Zip Code
	App. B471 - 36, rue de Picpus	75012 Paris	France	
Dated:		Inventor's Signature:	Le Magnet	
			At I	
Full Name of in	Last Name	First Name	Middle Name	
Inventor				_
Residence &	City	State of Foreign Country	Country of Citizenship	
Citizenship				
Post Office Address	Street	City	State of Country	Zip Code
Datada		Inventoria Signatura:		<u> </u>
Dated:		Inventor's Signature:		
Full Name of in	Last Name	First Name	Middle Name	
Inventor				
Residence &	City	State of Foreign Country	Country of Citizenship	·
Cifizenship				
Rost Office Address	Street	City	State of Country	Zip Code
7)1				

The last true and the list that the last the las





PHF 99,621

	Form PTO 1595	RECORDATION FORM COV	ER SHEET U.S. Dept. of
	Commerce (Rev. 6-93) Office	PATENTS ONLY	Patent and Trademark
	To the Honorable Commissioner of P copy thereof.	Patents and Trademarks:	Please record the attached original documents or
	1. Name of conveying party(ies):	2	. Name and address of receiving party(ies):
	PIERRE GAUTIER SANDRA DEL CORSO ISABELLE LEMAGUET		Name: U.S. Philips Corporation  Internal Address:
	Additional name(s) of conveying pa	art X attached?	Street Address: 1251 Avenue of the Americas
	3. Nature of conveyance:  X Assignment  Security Agreement  Other	Merger Change of	City: New York State: NY Zip: 10020-1104  Additional name(s) & address(es) attached?  Yes No  X
	Execution Date: FEBRUARY 22,	2001	
	4. Application number(s) or pater  If this document is being file application, is MARCH 22, 2001 A. Patent Application No.(s)  NONE YET		application, the execution date of the  B. Patent No.(s) attached? No Yes No X
	5. Name and address of party to concerning document should be	mailed: i	Total number of applications and patents nvolved:
	Name: U.S. Philips Corporation		7. Total fee (37 CFR 3.41)\$40.00
04/24/2001 AYILM 01 FC:970	AZ <sup>nt</sup> 660066062 <sup>c</sup> 1442470 <u>09806091</u> 860.00 CH Street Address: <u>580 White Plains</u>		Enclosed  X  Authorized to Deposit Account
Jelin	City State: NY Zip:	10591	(Attach duplicate copy of this page paying by deposit account)
٠		DO NOT US	E THIS SPACE
	9. Statement and signature.  To the best of my knowledge a copy is a true copy of the origin	and belief, the foregoinal document.	of information is true and correct and any attached
	Michael E. Marion, Reg. 32,26 Name of Person Signing	Signatu	7/26/0/ Date
			heet, attachments, and document: 2/

Commissioner of Patents and Trademarks
Box Assignments
Washington, D.C. 20231